

MIDDLE RIVER HEALTH CARE CENTER

8274 E SAN RD

SOUTH RANGE 54874 Phone:(715) 398-3523

Operated from 1/1 To 12/31 Days of Operation: 366

Operate in Conjunction with Hospital? No

Number of Beds Set Up and Staffed (12/31/04): 102

Total Licensed Bed Capacity (12/31/04): 102

Number of Residents on 12/31/04: 95

Ownership:

Highest Level License:

Operate in Conjunction with CBRF?

Title 18 (Medicare) Certified? Yes

Title 19 (Medicaid) Certified? Yes

Average Daily Census: 97

Corporation

Skilled

No

Yes

Yes

97

Services Provided to Non-Residents		Age, Gender, and Primary Diagnosis of Residents (12/31/04)				Length of Stay (12/31/04)		%	
		Primary Diagnosis	%	Age Groups	%	Less Than 1 Year			
Home Health Care	No					1 - 4 Years		27.4	
Supp. Home Care-Personal Care	No					More Than 4 Years		52.6	
Supp. Home Care-Household Services	No	Developmental Disabilities	1.1	Under 65	3.2			20.0	
Day Services	No	Mental Illness (Org./Psy)	52.6	65 - 74	6.3				
Respite Care	No	Mental Illness (Other)	7.4	75 - 84	27.4				100.0
Adult Day Care	No	Alcohol & Other Drug Abuse	0.0	85 - 94	57.9	*****			
Adult Day Health Care	No	Para-, Quadra-, Hemiplegic	0.0	95 & Over	5.3	Full-Time Equivalent			
Congregate Meals	No	Cancer	3.2			Nursing Staff per 100 Residents			
Home Delivered Meals	No	Fractures	0.0		100.0	(12/31/04)			
Other Meals	No	Cardiovascular	14.7	65 & Over	96.8				
Transportation	No	Cerebrovascular	6.3			RNs		7.6	
Referral Service	No	Diabetes	2.1	Gender	%	LPNs		9.8	
Other Services	Yes	Respiratory	0.0			Nursing Assistants,			
Provide Day Programming for		Other Medical Conditions	12.6	Male	32.6	Aides, & Orderlies			
Mentally Ill	No			Female	67.4				
Provide Day Programming for			100.0						
Developmentally Disabled	No				100.0				

## Method of Reimbursement

Medicare (Title 18)			Medicaid (Title 19)			Other			Private Pay			Family Care		Managed Care						
Level of Care	No.	%	Per Diem (\$)	No.	%	Per Diem (\$)	No.	%	Per Diem (\$)	No.	%	Per Diem (\$)	No.	%	Per Diem (\$)	No.	%	Per Diem (\$)	Total Resi- dents	% Of All
Int. Skilled Care	1	25.0	277	8	10.4	143	0	0.0	0	0	0.0	0	0	0.0	0	0	0.0	0	9	9.5
Skilled Care	3	75.0	251	67	87.0	121	0	0.0	0	14	100.0	145	0	0.0	0	0	0.0	0	84	88.4
Intermediate	---	---	---	1	1.3	100	0	0.0	0	0	0.0	0	0	0.0	0	0	0.0	0	1	1.1
Limited Care	---	---	---	0	0.0	0	0	0.0	0	0	0.0	0	0	0.0	0	0	0.0	0	0	0.0
Personal Care	---	---	---	---	---	---	0	0.0	0	0	0.0	0	0	0.0	0	0	0.0	0	0	0.0
Residential Care	---	---	---	---	---	---	0	0.0	0	0	0.0	0	0	0.0	0	0	0.0	0	0	0.0
Dev. Disabled	---	---	---	1	1.3	182	0	0.0	0	0	0.0	0	0	0.0	0	0	0.0	0	1	1.1
Traumatic Brain Inj	0	0.0	0	0	0.0	0	0	0.0	0	0	0.0	0	0	0.0	0	0	0.0	0	0	0.0
Ventilator-Dependent	0	0.0	0	0	0.0	0	0	0.0	0	0	0.0	0	0	0.0	0	0	0.0	0	0	0.0
Total	4	100.0		77	100.0		0	0.0		14	100.0		0	0.0		0	0.0		95	100.0

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Admissions, Discharges, and Deaths During Reporting Period		Percent Distribution of Residents' Conditions, Services, and Activities as of 12/31/04				
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Percent Admissions from:		Activities of	%	% Needing Assistance of	% Totally	Total
		Daily Living (ADL)	Independent	One Or Two Staff	Dependent	Number of Residents
Private Home/No Home Health	4.8	Bathing	2.1	73.7	24.2	95
Private Home/With Home Health	3.2	Dressing	8.4	69.5	22.1	95
Other Nursing Homes	4.8	Transferring	34.7	57.9	7.4	95
Acute Care Hospitals	85.5	Toilet Use	23.2	53.7	23.2	95
Psych. Hosp.-MR/DD Facilities	0.0	Eating	50.5	35.8	13.7	95
Rehabilitation Hospitals	1.6	*****				
Other Locations	0.0					
Total Number of Admissions	62	Continence	%	Special Treatments	%	
Percent Discharges To:		Indwelling Or External Catheter	1.1	Receiving Respiratory Care	9.5	
Private Home/No Home Health	6.3	Occ/Freq. Incontinent of Bladder	60.0	Receiving Tracheostomy Care	0.0	
Private Home/With Home Health	15.9	Occ/Freq. Incontinent of Bowel	42.1	Receiving Suctioning	0.0	
Other Nursing Homes	3.2			Receiving Ostomy Care	0.0	
Acute Care Hospitals	12.7	Mobility		Receiving Tube Feeding	2.1	
Psych. Hosp.-MR/DD Facilities	0.0	Physically Restrained	13.7	Receiving Mechanically Altered Diets	36.8	
Rehabilitation Hospitals	0.0					
Other Locations	1.6	Skin Care		Other Resident Characteristics		
Deaths	60.3	With Pressure Sores	8.4	Have Advance Directives	97.9	
Total Number of Discharges		With Rashes	8.4	Medications		
(Including Deaths)	63			Receiving Psychoactive Drugs	62.1	

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Selected Statistics: This Facility Compared to All Similar Metropolitan Area Facilities & Compared to All Facilities

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	This Facility %	Ownership: Proprietary Peer Group %	Ratio	Bed Size: 100-199 Peer Group %	Ratio	Licensure: Skilled Peer Group %	Ratio	All Facilities %	Ratio
Occupancy Rate: Average Daily Census/Licensed Beds	95.1	88.5	1.07	90.2	1.05	90.5	1.05	88.8	1.07
Current Residents from In-County	81.1	80.0	1.01	82.9	0.98	82.4	0.98	77.4	1.05
Admissions from In-County, Still Residing	33.9	17.8	1.90	19.7	1.72	20.0	1.69	19.4	1.75
Admissions/Average Daily Census	63.9	184.7	0.35	169.5	0.38	156.2	0.41	146.5	0.44
Discharges/Average Daily Census	64.9	188.6	0.34	170.5	0.38	158.4	0.41	148.0	0.44
Discharges To Private Residence/Average Daily Census	14.4	86.2	0.17	77.4	0.19	72.4	0.20	66.9	0.22
Residents Receiving Skilled Care	97.9	95.3	1.03	95.4	1.03	94.7	1.03	89.9	1.09
Residents Aged 65 and Older	96.8	92.4	1.05	91.4	1.06	91.8	1.06	87.9	1.10
Title 19 (Medicaid) Funded Residents	81.1	62.9	1.29	62.5	1.30	62.7	1.29	66.1	1.23
Private Pay Funded Residents	14.7	20.3	0.73	21.7	0.68	23.3	0.63	20.6	0.72
Developmentally Disabled Residents	1.1	0.9	1.19	0.9	1.12	1.1	0.94	6.0	0.17
Mentally Ill Residents	60.0	31.7	1.89	36.8	1.63	37.3	1.61	33.6	1.79
General Medical Service Residents	12.6	21.2	0.60	19.6	0.64	20.4	0.62	21.1	0.60
Impaired ADL (Mean)	47.4	48.6	0.97	48.8	0.97	48.8	0.97	49.4	0.96
Psychological Problems	62.1	56.4	1.10	57.5	1.08	59.4	1.05	57.7	1.08
Nursing Care Required (Mean)	8.2	6.7	1.22	6.7	1.22	6.9	1.18	7.4	1.10